WIDENING PARTICIAPTION IN NURSE EDUCATION; AN INTEGRATIVE LITERATURE REVIEW

ABSTRACT

Background: Widening participation into higher education is espoused within educational policy in the UK, and internationally, as a mechanism to promote equality and social mobility. As nurse education is located within higher education it has a responsibility to promote widening participation within pre-registration educational programmes. It could also be argued that the profession has a responsibility to promote equality to ensure its' workforce is as diverse as possible in order to best address the health needs of diverse populations.

Objectives: To undertake an integrative review on published papers exploring Widening Participation in undergraduate, pre-registration nurse education in the UK

Design: A six step integrative review methodology was utilised, reviewing papers 2013-2016; published in English.

Data sources: Search of CINAHL, Education Source, MEDLINE, PsychINFO, SocINDEX, Science Direct, Business Scource Complete, ERIC, British Library ETOS, Teacher Reference Centre, Informit Health Collection and Informit Humanities and Social Science Collection which highlighted 449 citations; from these 14 papers met the review inclusion criteria.

Review methods: Both empirical studies and editorials focusing upon widening participation in pre-registration nurse education in the UK (2013-2016) were included. Papers excluded were non UK papers or papers not focussed upon widening participation in pre-registration nursing education. Research papers included in the review were assessed for quality using appropriate critical appraisal tools

Results: 14 papers were included in the review; these were analysed thematically identifying four themes; knowledge and identification of WP, pedagogy and WP, attrition and retention and career prospects.

Conclusions: Whilst widening participation is a key issue for both nurse education and the wider profession there is a lack of conceptualisation and focus regarding mechanisms to both encourage and support a wider diversity of entrant. Whilst there are some studies, these focus on particular individual widening participation groups rather than a wider strategic focus across the student lifecycle.

Key words

Widening Participation, Fair Access, Equity, Equality and Diversity, Nurse Education, Nurse Training, Nursing

INTRODUCTION

Widening participation (WP) into Higher Education is an international concern (Bowes et al. 2013 and Shah et al. 2016). It is essentially concerned with increasing the numbers of people from underrepresented groups attending Higher Education. Whilst particular target groups differ internationally some commonalities exist, for example, mature or second chance learner, students with disabilities, students from black or ethnic minority groups and from lower socioeconomic backgrounds (Thomas and Quinn, 2003). In England, the commitment to WP is demonstrated in the national strategy 'Access and student success in higher education' (Department for Business Innovation and Skills 2014, p3), which asserts: '…anyone with the potential to succeed in Higher Education should have the equal opportunity to do so'. Nomenclature differs between countries, for example in the United Kingdom, the phrase widening participation is used, whereas in Australia the preferred term is equity; at the heart of both of these is a commitment to increase opportunities and outcomes for groups which traditionally have limited access to Higher Education and the associated benefits. However it has to be remembered that Widening Participation (and equivalent concepts) is not just concerned with access to Higher education, but also success in higher education and beyond, including completion, attainment and progression to employment and/or post graduate study (Higher Education Funding Council for England, 2013).

Reasons for the drive to increase the diversity of the student population are multi-faceted, with benefits to individuals, the HE community and society (Department for Business Innovation and Skills, 2014). Graduates have greater job security, increased financial well-being and better physical and mental health. Greater diversity within higher education also enriches learning, promoting values such as equality and tolerance and diversifying the social and cultural environment (Shaw et al. 2007). While for society WP promotes social mobility and societal economic and cultural growth (Department for Business Innovation and Skills, 2014). Social Mobility relates to the ability of individuals to move their social status, education is key mechanism of social mobility as it changes individuals and groups social status through greater financial stability.

Before we explore WP in nursing, we need to define what we mean by 'nursing'. Within the nursing workforce there are unregistered but trained nursing assistants and associates, however for the context of this paper the word 'nurse' and 'nursing' refers to individuals who have a registered nursing qualification with the Nursing and Midwifery Council, the UK nursing regulatory body. The nursing profession constitutes the largest professional group within the NHS, and as such it is a key group to consider with regards to WP in healthcare services

As the majority of educational programmes for nursing professions are located within higher education, these courses contribute to the educational sector's responsibility for WP. However there is also responsibility of the professions to diversify the workforce to meet the needs of the communities they work with. For example, the indigenous population in Australia experiences stark health inequalities (Stewart et al. 2016); health care professionals working in these communities have not been effective in addressing health inequalities for a number of reasons one being cultural differences. This has resulted in the Australian Nursing and Midwifery Accreditation Council asserting that nurse education programmes have to include education on indigenous health and culture (Australian Nursing and Midwifery Accreditation Council, 2012). This has promoted targeted recruitment and training of indigenous health workers to work within their local community (Kumar et al. 2015). Within Europe, the UK National Health Service (NHS) is the largest employer yet the diversity of the current workforce is not representative of the general population (Health Education England 2014). Widening Participation is not only important for patient care; it is also a fundamental mechanism to address workforce issues within the profession. There are concerns regarding nursing numbers (Department of Health, 2010)**.** There is an international nurse shortage, due to both an ageing workforce as well as a reduction in the numbers of young people entering the profession (Marangozov et al. 2016), and the global mobility of nurses.

During the 21st century nursing sustained a strong record for recruiting and training a diverse population of students (Royal College of Nursing, 2008), but completion rates have been lower than in other subjects (Woodfield, 2014) and for specific groups: for example males and students born outside of the United Kingdom (Mulholland et al. 2008), highlighting that there is still more work needed to truly widen participation into nursing. A literature review undertaken on WP on health care programmes (Kaehne et al. 2014), found that the evidence base about WP is limited, and studies tend to be small and often single site. There have been no published reviews which have specifically explored WP in nurse educational programmes. Where there has been targeted work this has be within the field of gender - increasing the numbers of males accessing nursing (Mauritius, Hollup 2014 and Australia, Weaver et al. 2013). Other research has been undertaken specifically about students with disabilities, focusing on supporting disabled students already enrolled on nursing programme rather than WP *per se* (in the United Kingdom, Salkeld 2016, Morris and Turnball 2006, Australia, Azzopardi et al 2013, Canada, Ashcroft and Lutfiyya 2013, Japan, Ikematsu et al 2014, Ireland, Evans 2014, Howlin et al. 2014a and b).   Health Education England who are responsible for ensuring the healthcare workforce have the right skills have developed their own WP strategy (Health Education England, 2014) cementing the professional commitment to WP. One of

their priorities is to increase the understanding of what works and does not work in relation to WP and healthcare education. This paper highlights and contributes to this agenda' the research question that framed the review was: To what degree is widening participation embedded in nurse education? The aim is to provide an integrative review of published papers on WP in undergraduate, pre-registration nursing students in the United Kingdom.

REVIEW METHODS

An integrative review methodology was chosen as it enables the inclusion of empirical papers as well as data gained from theoretical and conceptual papers (Tavares de Souza et al. 2010) thus enabling a comprehensive examination of WP in nursing in the United Kingdom.

Searching

This integrative review followed the six phases identified by Tavares de Souza et al (2010) (figure 1). Two searches were conducted (table 1 details the search terms); the first was using mySearch, Bournemouth University's iteration of the EBSCO Discovery Service (EDS) tool and secondly Web of Science and Scopus. These searches enabled systematic searching of multiple bibliographic databases (CINAHL, Education Source, MEDLINE, PsychINFO, SocINDEX, Science Direct, Business Scource Complete, ERIC, British Library ETOS, Teacher Reference Centre, Informit Health Collection and Informit Humanities and Social Science Collection). The review was undertaken on papers published from 2013 onwards. 2013 was chosen as this was the year that all undergraduate nurse education in the UK moved to an all graduate status. Searches were limited to studies in English language and focussed on peer-reviewed literature.

Screening and Selection

Papers were selected using a three stage structured screening process (figure 2). In the first stage, titles and abstracts were screened by VH and MB to ensure matching criteria and relevancy (n=449). At stage one 414 records were excluded for a variety of reasons, including lack of relevancy (such as dental or veterinary nursing), or papers which were not peer reviewed papers (such as news items or book reviews). This resulted in 35 papers being included in the stage two review. In this stage, the full text of each paper was reviewed separately by two researchers [VH, MB] in order to validate judgements on the pre-determined inclusion/ exclusion criteria (table 1) and to minimise the possibility of researcher bias (Centre for reviews and Dissemination, 2009). At this stage a further 21 papers were excluded from the review because they were not focused upon the UK context or

focussed upon WP in nursing education or nursing. In the third stage, the 14 papers included in the review were systematically reviewed [MB, VH] using a structured format (table 2). At this stage, when research papers were reviewed, the quality of the research was assessed using critical appraisal tools (Critical Appraisal Skills Programme (CASP) 2013 and Moule et al. 2003). Two of the researchers [VH, MB] then undertook a thematic analysis on the final papers selected in the review and extracted themes around the nature of WP in nurse education. These findings were compared and discussed with the other two researchers working on the project [LT, VD] thus reducing researcher bias. Four themes were identified: knowledge and identification of WP, pedagogy and WP, attrition and retention, and career prospects.

FINDINGS

This section shall firstly present some reflections on the study characteristics of the papers included in the review before continuing to explore each of the four themes identified (knowledge and identification of WP, pedagogy and WP, attrition and retention, and career prospects).

Study Characteristics

The study characteristics of the fourteen review documents (Table 2) were: four editorials reporting on factors influencing WP, and ten papers reported on empirical studies of WP initiatives in nurse education. Most of the empirical studies were small-scale, using qualitative methodologies (n=7) - focus groups, interviews and narrative approaches. The remaining three studies used quantitative methodologies, including questionnaires (n=2) and secondary data analysis (n=1). In the quantitative studies there was a large sample of 804 and 812 respectively however only one of these was across two universities.

Knowledge and identification of WP

Two of the papers (Allan et al. 2013 and Young, 2016) focussed on what constituted a WP student. Allan et al. paper (2013) highlighted that whilst nurse educators could correctly identify mature students and individuals with a disability, beyond this their knowledge regarding other WP groups was limited. In addition, both papers identified that nurse educators are not informed regarding the WP status of their students which they argued could lead to difficulties for nurse educators to be able to provide appropriate support mechanisms.

Several of the papers focussed upon specific WP characteristics either directly (Sharples 2013), or indirectly (Harris et al. 2013, Hasson et al. 2013, Kiernan et al. 2015, McKendry 2014, Ross 2013, Ooms et al. 2013, Young 2016). Sharples (2013) paper presented a study exploring the experiences of eight deaf women and their access to mental health nurse education. These women were the first deaf signing individuals to be registered with the NMC; however the paper does not explore their access to the programme but rather their learning experiences whilst on the course. The study identified that the university experience was easier to manage (with access to interpreters) whilst the practice environment was more challenging and even in specialist deaf services the nurses could be isolated. Hasson et al's (2013) paper explored the impact of part-time work as a Health Care Assistant (HCA) by 32 nursing students, identifying advantages and disadvantages. Although the study did not identify a specific WP group, it is known that mature students with caring responsibilities and those from lower socioeconomic groups often undertake additional work during their studies due to financial constraints (McKendry et al. 2015; Kiernan et al. 2015). The study identified advantages of part-time work, which included increasing confidence and greater exposure in the clinical environment, which in turn assisted the transition to the reality of nursing practice. A negative aspect was role ambiguity: when on placement they were unsure whether to adopt a health care assistant or student nurse role. A major limitation of the paper however is that it does not examine the impact of part-time work on successful completion of the course or grades achieved.

A qualitative study with ten healthcare university students (Gopee and Deane, 2013), sought to explore the strategies the students used to develop their academic writing. The study identified the challenges in academic work experienced by students when English was not their first language which was often compounded by cultural differences. Whilst the learning strategies identified by the students were explored, the paper does not specifically highlight the specific needs for individuals from different ethnic minority groups, and it did not specifically focus on nursing students.

Only one study in the review focussed specifically upon entry to nurse education: Brimble (2015) explored the extent to which traditional and non-traditional entry routes impacted upon academic outcomes. This quantitative study examined 418 students accessing a pre-registration nursing programme over a three year period at one university. Whilst all of the students had the same UCAS entry points (240) they were obtained either via different entry qualifications (academic A levels, n=147; vocational BTEC, n=99; or alternative qualification for mature learners Access course, n=172). The study categorised the students by social class, gender and age and did not identify any statistical

significance in final degree classification of these individuals. Students who entered via the vocational BTEC route were more likely to complete, and students who entered via the alternative Access route for mature students were less likely to complete the course due to a mixture of academic failure and personal reasons. These findings however were not statically significant. Kiernan et al. (2015) focussed upon mature nursing students with caring responsibilities. This study identified that the students showed resilience and a strong determination to succeed; this was partly motivated by having dependents and the opportunity for social mobility. They emphasised that family support was a significant feature and although they expressed guilt regarding the impact of their study on their family they were determined to succeed. In addition, McKendry et al. (2014) study on WP students identified the 'juggling' that mature learners have to do, managing both the course and family commitments, as well as working part-time to boost their income.

Pedagogy and WP

Many of the papers explored pedagogical approaches that could assist students from a WP background to be successful. Studies were based upon the students' perspectives (Draper et al. 2014, Gopee and Deane 2013, Kiernan et al. 2015), data from university (Brimble, 2015) or data from staff (Allan et al. 2013). Pedagogy covered types of assessment, e-learning, flexible course delivery, and learning support.

Brimble (2015) identified that students who entered nursing programmes via Access courses did statistically significantly less well in examination assessments in comparison to BTEC and A Level students, highlighting the need for further support in examination preparation and other assessments used in local nursing courses. For international students, Gopee and Deane's (2013) small study identified that language and cultural differences affected both style and expression in academic writing. The students experienced difficulty adapting to university conventions and lacked sufficient support to develop this skill. Pedagogical approaches which ameliorated these difficulties included clearer assignment guidelines, academic writing support centres which provided writing support resources, group work and informal peer learning, and opportunities for writing practise. Both Gopee and Deane (2013) and Brimble (2015) highlight additional needs for students from WP backgrounds, and the need for transparency and support to enable students to complete assessed work successfully.

Five of the papers included in the review specifically focussed upon flexible delivery and approaches to nurse education programmes (Kiernan et al. 2015, Glasper 2014, Draper et al. 2014, Williams et

al. 2013, Allan et al. (2013). Draper's paper examines the Open University (OU) which is probably the most established and flexible approach to nurse registration. This small qualitative study explored employers' (n=7) and alumni's (n=17) perspectives of the four year apprenticeship-style course. The research highlighted that studying in one's workplace elicited a mixed experience, positive in that the student was used to the clinical environment and the staff which eased the transition; however, this was also a disadvantage when it came to role transition from a health care support worker to a student nurse. Another advantage was the flexibility of the programme which enabled individuals from diverse backgrounds to access nurse education, yet paradoxically the distance learning nature was challenging for these students, requiring them to be highly motivated and organised. Similarly, the editorial by Williams et al. (2103) also explores a pre-entry nursing apprenticeship programme developed in Wales, as an alternative to an Access course. This course which is jointly developed between clinical partners and a university provided a 'flexible' access course for health care assistants. This programme consisted of a blended approach to learning for support workers which included study days at the university, an academic and workplace mentor and online learning resources. Whilst the paper highlights success in interest in the course, it does not go on to indicate how many of these students progress to nurse education in HE. A blended approach to delivery was also explored by Allan et al. (2013), as e-learning is sometimes assumed to address the needs of a more diverse student population yet this research identified that when staff were aware of students from WP backgrounds it did not really influence their teaching and learning.

Glasper's (2014) editorial identifies that there are some 1.3 million unregistered health care assistants working in the NHS and social care and many of these individuals who wish to access nurse education struggle to do so. He explores the potential of the new apprenticeship-style programme being proposed by HEE as an opportunity to address the lack of career development and education for these individuals. However, he also argues that the proposed apprentices must be at degree level, citing evidence from Aiken et al. (2014) which highlighted a correlation between reduced mortality rates and increased numbers of graduate nurses. In contrast Kiernan et al. (2015) argue against longer apprenticeship courses, which could increase the financial burden to students. Instead they identify that students want a well-organised course, including a timetable in advance to enable them to plan their other commitments, and greater transparency regarding placements, financial issues, and additional costs.

Attrition and retention

The penultimate theme is retention and success. Draper et al. (2014) argue that the flexibility offered by the four year OU programme enables students to earn money during their learning; however the paper did not explore attrition and retention levels of students on the OU programme. As previously identified Brimble's (2015) study noted that access entry students are less likely to complete the programme compared to BTEC and A level students (although this was not statistically significant). 56% of those who left was due to academic failure were Access course students, and 54% who left due to personal reasons were also access entry students, however the study was not able to provide any breakdown of the personal reasons. Ultimately 110 students (> 25%) from the original sample of 418 did not complete, highlighting the need for further exploration for this high percentage of attrition, with more specific focus on those entering via the Access course, since they are more likely to be from a BME group or mature students (Ross 2013).

Career prospects

The influence of WP status and employment opportunities was considered by two papers (Draper 2014, Harris et al. 2013). Harris et al's was a large quantitative study using a questionnaire and secondary analysis of institutional data across eight universities. The study identified that ethnicity was a significant factor in employment offers; with significantly lower job offers for newly qualified 'Black African' and 'Asian/Chinese' ethnic groups. Also the university in which they studied also appears to have a significant impact upon the newly qualified students' employment, yet there was insufficient information regarding the different types of university so it is unclear whether studying at a selective university versus a more inclusive institution has an impact. Students' confidence in the interview process was also explored and again ethnicity and institution attended were identified as significant factors. In contrast, Draper et al. (2014, p 1307) highlighted that employers welcome students who had undertaken the apprenticeship-style programme over four years because they 'hit the ground running', however this was based upon a small scale qualitative research and therefore caution needs to be applied regarding generalisability.

DISCUSSION

We now return to the question that framed the review *'to what degree is widening participation embedded in nurse education?'* It is evident that WP is a key issue for nursing, firstly to ensure that it recruits a diverse workforce that is representative and able to meet the healthcare needs of a

diverse population. Secondly it is a key recruitment strategy for the profession, due to an international shortage of nurses and an ageing workforce. Despite this, WP is not really integrated into nurse education programmes, and there is a lack of research exploring WP in the context of nurse education.

This review finds a lack of clarity of what WP is; it tends to be understood in terms of student diversity, rather than changed practices, and there is a lack of awareness of the groups to be targeted and of their specific needs (Kaehene et al. 2014 also found this). There are no studies addressing how to attract a more diverse student body into nursing. Despite poor retention figures for nursing, and differential employment outcomes for graduate nurses from non-traditional backgrounds there is an absence of research about retention and success, and the study about career prospects (Harris et al. 2013) identifies the issues, but not the (potential) solutions with regards to progression.

This raises the question as to why there is so little research about WP in nursing education, given the Higher Eduction context and needs of the profession. Reasons may be due nurse education's history and recruitment practices: entry routes have always been comparatively diverse and flexible in the United Kingdom. In the 1980s applicants could sit an entrance test, and now there are a plethora of entry routes (Glasper, 2010). This enables a variety of individuals to access nurse education especially mature applicants that may not have achieved well in compulsory education. Furthermore, until this year nurse educational programmes were commissioned by the National Health Service and did not incur student tuition fees and offered a mixture of means and non-means tested bursaries. These factors have made nursing an attractive course for many non-traditional students wishing to access Higher Eduction.

Flexible entry routes and different funding arrangements have enabled nurse education programmes to be a key driver in social mobility, enabling those from lower socio-economic backgrounds to gain a professional registration and a career offering enhanced financial stability, job security and satisfaction. Anecdotally, we are aware of the impact of this through our work with students and have seen how the course has transformed their lives and that of their children. Yet there appears to be no evidence or exploration of the impact of nursing on social mobility, even though social mobility is a key driver behind WP. Perhaps WP and social mobility are taken for granted in nurse education.

The funding context for nursing education in England is changing, from September 2017 new student nurses will pay tuition fees, and will finance their study through loans rather than grants (HM Treasury 2015) (NB These funding changes only apply to England and Northern Ireland, as a result of the decentralization and devolution that occurred within the UK in 1998, Greer 2008). Whilst it is estimated that for the average band 5 staff nurses this will result in a repayment of around £5.25 a month, initial reports have highlighted a drop in nursing applications from 56,080 in 2016 to 45,090 in 2017 a drop of around 20%, and the drop is greater for mature applicants (over 21) (Universities and Colleges Admissions Service 2017). Unfortunately further breakdown of applications from WP groups is not available at this time. The long term impact of this policy change on WP needs to be monitored and reviewed.

A secondary implication of this policy change is that nursing programmes will now be included in institutional Access Agreements. All English higher education providers who charge above the basic tuition fees (£6,000 full time, £4,500 part time) have to produce and publish an Access Agreement annually, outlining plans to support WP, which must be approved by the Office for Fair Access, the independent regulator of fair access to higher education. This has implications for nurse educators who have to demonstrate their commitment to WP at all stages of the students journey (pre-access, on course support as well as employment and post graduate study). Whilst this review has demonstrated pockets of research and practice regarding on course support for specific WP groups it has not demonstrated a systematic approach to WP across the student lifecycle within nursing. Nurse educators must consider their Access Agreement obligations, together with their professional responsibilities identified in the Health Education England WP strategy (Health Education England, 2014). However, the strategy does not define WP, highlighting that an agreed definition for healthcare needs to be established with National Health Service employers. In 2017, there is still no working definition of WP in the context of nursing and nurse education and this perhaps fuels the lack of focus on WP in the profession.

Where there were empirical research papers regarding WP they identified that whilst nursing had opened the entry gates to diverse groups, this did not ensure parity of outcomes, with lower rates of academic success (Brimble, 2013) and poorer employment outcomes (Harris et al. 2013) and isolating clinical experiences (Sharples, 2013). These studies highlight that the nursing profession needs to do more if it is to be successful in embedding WP across the lifecycle. We would argue the first step needs to be in increasing transparency (Allan et al. 2013), in terms of what WP is, who WP students are, how they can best be recruited and enabled to success, in the provision of information

regarding issues such as course organisation and expectations, placements and finance; and this needs to be accompanied by a change in thinking away from specific groups of students, towards institutional practices. Institutional change is required towards awareness and implementation of inclusive pedagogical approaches (Hockings, 2010), moving beyond additional academic support. McKendry et al. (2014) assert that nurturing a sense of belonging is crucial in developing resilience and promoting retention and success (Thomas, 2012), which requires a whole institution approach (Thomas et al. 2017).

Lastly, this review has identified that WP in nursing has a poor knowledge base and has tended to focus upon small scale qualitative research and this is similar to a review conducted by Kaehne et al. (2014) in healthcare studies. Whilst qualitative research is important in understanding lived experiences of students, larger, mixed methods, multi-centre research, including longitudinal studies exploring the impact of WP engagement across the whole student journey and into employment as registered nurses, is required.

CONCLUSION

Widening participation is a key issue for the nursing profession to address. Historically nursing has been successful in recruiting from a diverse base, but the policy context is changing and a strategic vision is required for the profession to ensure it continues to attract, recruit and educate those from diverse backgrounds. It is of paramount importance that both nursing education providers and clinical nurses begin to have a more strategic understanding of and focus on WP across the student lifecycle moving to secure a high quality and a diverse workforce to meet the health needs of our society. This needs to be underpinned by a much more robust evidence base than is currently available.

REFERENCES

Aiken, L., Sloane, D., Bruyneel, L., Van de Heede, K., Griffiths, P., Busse, R., Diomidous, M., Kinnunen, J., Kózka, M., Lesaffre, E., McHugh, M., Moreno-Casbas, M., Rafferty, AM., Schwendimann, R., Scott, A., Tishelman, C., Achterberg, T., Sermeus, W., 2014. Nurse staffing and education and hospital mortality in nine European countries: a retrospective observational study Lancet 383(24), 1824-1830

Allan, H., O'Driscoll, M., Simpson, V., Shawe, J., 2013. 'Teachers' views of using e-learning for non-traditional students in higher education across three disciplines [nursing, chemistry and management] at a time of massification and increased diversity in higher education, Nurse Education Today 33, 1068-1073

Ashcroft, T., Lutfiyya, Z., 2013. Nursing Educators' perspectives of students with disabilities: A grounded theory study Nurse Education Today 33, 1316-1321

Australian Nursing and Midwifery Accreditation Council, 2012. Registered Nurse Accreditation Standards. Available from:

http://www.anmac.org.au/sites/default/files/documents/ANMAC_RN_Accreditation_Standards_2012.pdf [Accessed 21.02.2017]

Azzopardi, T., Johnson, A., Phillips, K., Dickson, C., Hengstberger-Sims, C., Goldsmith, M., and Allan, T., 2013. Simulation as a learning strategy: supporting undergraduate nursing students with disabilities Journal of Clinical Nursing 23, 402-409

Bowes, L., Thomas, L., Peck, L., Nathwani, T., 2013. International Research on the Effectiveness of Widening Participation Report to HEFCE and OFFA Edgehill; Edgehill University.

Brimble, MJ 2015. 'Does Entry Route Really Affect Academic Outcome? Academic Achievement of Traditional versus Non Traditional Entrants to BN (Hons) Pre-Registration Nursing Programmes', Journal of Further and Higher Education 39(3), 379-398

Centre for Reviews and Dissemination, 2009. Systematic reviews: CRD's guidance for undertaking reviews in health care, 3rd edit. York: Centre for Reviews and Dissemination, University of York

Department for Business, Innovation and Skills 2014.National Strategy for access and student success in higher education. London: Department for Business, Innovation and Skills

Department of Health, 2010. Widening participation in pre-registration nursing programmes. London: Department of Health

Draper, J., Beretta, R., Kenward, L., McDonagh, L., Messenger, J., Rounce, J., 2014. Ready to hit the ground running: Alumni and employer accounts of a unique part-time distance learning pre-registration nurse education programme' Nurse Education Today 34, 1305-1310

Evans, W., 2014. I am not a dyslexic person I'm a person with dyslexia: identity constructed of dyslexia among students in nurse education. Journal of Advanced Nursing 70(2) 360-372

Glasper A., 2010. Widening participation in pre-registration nursing British Journal of Nursing 19, 924-925.

Glasper, A., 2014. New nursing apprenticeship schemes to be introduced British Journal of Nursing 23(7), 394

Gopee, N., Deane, M., 2013. Strategies for successful academic writing — Institutional and non-institutional support for students' Nurse Education Today 33, 1624-1631

Greer, SL., 2008. Devolution and health policy in the UK *Eurohealth* 14, 22-24

Harris, R., Ooms, A., Grant, R., Marshall-Lucette, S., Chu, C., Sayer, J., Burke, L., 2013. Equality of employment opportunities for nurses at the point of qualification: An exploratory study International Journal of Nursing Studies 50, 303-313

Hasson, F., McKenna, H., Keeney, S., 2013. A qualitative study exploring the impact of student nurses working part time as a health care assistant Nurse Education Today 33, 873-879

Health Education England, 2014. Widening participation it matters; our strategy and initial action plan (draft consultation) London: Health Education England.

Higher Education Funding Council for England, 2013. Literature Review of research into WP to higher education HEFCE: London.

HM Treasury., 2015. Spending Review and Autumn Statement. Available from:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/479749/52229_Blue_Book_PU1865_Web_Accessible.pdf [Accessed 20.02.2017]

Hockings, C., 2010. Inclusive learning and teaching in higher education: a synthesis of research. York: Higher Education Academy

Hollup, O., 2014. The impact of gender, culture, and sexuality on Mauritian nursing: Nursing as a non-gendered occupational identity or masculine field? International Journal of Nursing Studies 51, 752-760

Howlin, F., Halligan, P., O'Toole, S., 2014a. Development and implementation of a clinical needed assessment to support nursing and midwifery students with a disability in clinical practice: Part 1. Nurse Education in Practice 14; 557-564.

Howlin, F., Halligan, P., O'Toole, S., 2014b. Evaluation of a clinical needs assessment and exploration of the associated supports for students with a disability in clinical practice: Part 2. Nurse Education in Practice 14; 565-572.

Ikematsu, Y., Mizutani, M., Tozaka, H., Mori, S., Egwawa, K., Endo, M., Yokouchi, M., 2014. Nursing students with special educational needs in Japan. Nurse Education in Practice 14, 674-679.

Kaehne, A., Maden, M., Thomas, L., Brown, J., Roe, B., 2014. Literature Review on approaches and impact of interventions to facilitate Widening participation in Healthcare Programmes. Ormskirk; Edgehill University.

Kiernan, M., Proud, C., Jackson, S., 2015. The juggling act: Do student nurses who care for dependants need an adapted course? An applied policy research study *Nurse Education Today*, 35, 1085-1090.

Kumar, K., Jones, D., Naden, K., Roberts, C., 2015. Rural and remote young people's health careers decision making within a health workforce development programme: a qualitative exploration. Rural and Remote Health 15(3303), 1-8.

Marangozov, R., Williams, M., Buchan, J., 2016. The labour market for nurses in the UK and its relationship to the demand for, and supply of, international nurses in the NHS. Institute for Employment Studies: Brighton.

McKendry, S., Wright, M., Stevenson, K., 2014. Why here and why stay? Students' voices on the retention strategies of a widening participation university' Nurse Education Today 34, 872-877.

Morris, D., Turnball, P., 2006. Clinical experiences of students with dyslexia. Journal of Advanced Nursing 54(2), 238-247.

Mulholland, J., Anionwu, E., Atkins, R., Tappern, M., Franks, P., 2008. Diversity, attrition and transition into nursing Journal of Advanced Nursing 64, 49-59.

National Centre for student equity in higher education, 2017. Available from
https://www.ncsehe.edu.au/about/directors-welcome/ [Accessed 5.1.2017]

Ooms, A., Fergy, S., Marks-Maran, D., Burke, L., Sheehy, K., 2013.Providing learning support to nursing students: A study of two universities, *Nurse Education In Practice*, 13(2), 89-95

Royal College of Nursing 2008. Nursing our future; an RCN study into the challenges facing today's nursing students in the UK. Available from
https://www2.rcn.org.uk/__data/assets/pdf_file/0008/197756/003306.pdf [Accessed 22.11.2016]

Ross, F., 2013. Social mobility – what does it mean in nursing education British Journal of Nursing 22(13), 787

Salkeld, J., 2016. A Model to support nursing students with dyslexia Nursing Standard 30(47) 46-51

Shah, M., Bennett, A. and Southgate, E. 2016 Widening Higher Education Participation; A Global Perspective. Elsevier: Waltham, MA, US & Kidlington, UK

Sharples, N., 2013. An exploration of deaf women's access to mental health nurse education in the United Kingdom *Nurse Education Today* 33, 976-980

Shaw, J., Brain, B., Bridger, K., Foreman, J. and Reid, I. 2007. Embedding WP and promoting student diversity. What can be learned from a business case approach?   York: Higher Education Academy.

Stewart, J., Sanson-Fisher, R., Eades, S., 2016. Aboriginal and Torres Strait Islander health: accuracy of patient self-report of screening for diabetes, high cholesterol and cervical cancer. Australian and New Zealand Journal of Public Health, 40 (sup 1) S3-S6

Tavares de Souza, M., Dias da Silva, M., Carvalho, R., 2010. Integrative review: what is it? How to do it? *Einstein (São Paulo)* 8(1), 102-106

Thomas, L., 2012. Building student engagement and belonging at a time of change in higher education. London: Paul Hamlyn Foundation

Thomas, L., Hill, M., O' Mahony, J. Yorke, M. 2017. Supporting student success: Strategies for institutional change. Findings and recommendations from the what works? Student retention and success programme. London: Paul Hamlyn Foundation

Thomas, L., and Quinn, J., 2003. International Insights into WP: Supporting the success of under-represented groups in tertiary education. Stoke-on-Trent: Institute for Access Studies, Staffordshire University

Universities and Colleges Admissions Service, 2017. 2017 cycle applicant figures – January deadline. Available from: https://www.ucas.com/corporate/data-and-analysis/ucas-undergraduate-releases/2017-cycle-applicant-figures-%E2%80%93-january-deadline [Accessed 20.02.2017]

Weaver, R., Ferguson, C., Wilbourne, M., Salamonson, Y., 2013. Men in nursing on television: exploring and reinforcing stereotypes. Journal of Advanced Nursing 70(4) 833-842

Williams, J., Ledsam, R., Suffin, M., Jolly, S., Bennet, E., 2013, Welsh university and health boards HCSW collaboration British Journal Of Healthcare Assistants 7(1),36-39

Woodfield, R., 2014. Undergraduate retention and attainment across the disciplines. York: Higher Education Academy

Young, K., 2016. Working towards widening participation in nurse education British Journal of Nursing 25(2) 112-116

Tables

Table 1: Search terms and inclusion/exclusion criteria

Search Terms
Nurs*
AND
Widening participation OR widening access OR social mobility OR social justice OR fair access OR aimhigher OR lifelong learning OR part-time OR apprenticeship* OR workforce development * OR "Access to HE" OR "Alternative entry route*" OR Bridging program*e* OR NVQ* OR QCF* OR "Qualification and Credit Framework*" OR Diploma*
AND
uk or united kingdom or britain or england or wales or scotland or northern Ireland

Inclusion and Exclusion Criteria	
Inclusion	Exclusion
English language	Non-English language
2013 onwards	Pre 2013
UK	International Research
Peer reviewed literature	Non-peer reviewed literature, news reports, commentaries, initiatives.
Widening Participation	

Source and Country	WP group	Aims	Methods (including Research Design; Participants; Data Collection; Analysis)	Findings, Conclusions and Recommendations	Limitations and Critical Appraisal Tool
Young (2016)	Disability, Ethnicity, Socio-economic status		Editorial	This paper examines four areas of WP: disability, ethnicity, socioeconomic status and family responsibilities. It identifies that nurse educators do not know which students are from WP background and are therefore unable to tailor the learning and teaching practices. Better information sharing would be helpful, as well as advocating further exploration of what works for different WP groups.	Editorial – not research
Brimble et al. (2015)	NS	To explore academic journey of pre-registration nursing students via various routes	Quantitative; Review of 3 years data, 6 cohorts (n=418) on gender, age, post code. Included reason for leaving, module results and degree classification. Data analyses using SPSS, Analysis of variance (ANOVA) and Levene's test.	308 of the 418 students completed the course. BTEC students most successful whilst Access least successful (statistically significant p=0.019). Year two was the most critical year in students study where the differences occurred (ANOVA score 0.025). Cohort, social class and gender were found to be insignificant. Whilst entry route was shown to have an effect on attrition this was not statistically significant	This was a large secondary data analysis study of one HE institution. Ethnicity was not included. Appraisal=Moule et al.
Kiernan et al (2015)	Carers	To explore student nurses experiences of caring for dependant family	14 participants (13 female, 1 male). Focus group or telephone interviews. Framework analysis.	Mature students caring for dependents showed more resilience & determination to succeed, motivated by impact of qualification on family circumstances. Family support was crucial. Yet this was also challenging for students who expressed guilt in juggling priorities. Students do not need adapted course but clear and transparent	Small scale, single site study. Research conducted by staff working at the university. Appraisal=CASP

				information.	
Draper et al. (2014)	NS	Explored impact of The Open University's preregistration nursing programme employability and , career progression	Three geographical areas across the UK. Alumni (n=17) and employers (n=7). Qualitative study (telephone interviews). Content analysis.	4 themes: transition, expectations, learning for and in practice, and flexibility. Study identified the programme equipped students to meet competencies and expectations of a newly qualified nurse. It provided employers with a flexible route to growing own workforce and alumni the opportunity to achieve ambitions of becoming a qualified nurse.	Small scale, single site exploratory study. Research undertaken OU staff which could introduce research bias Appraisal=CASP
Glasper (2014)	NS	Introduction of apprenticeship schemes leading to nurse registration	Editorial	Discusses new apprenticeship scheme for HCAs as a response to the Cavendish report. This new scheme to professional nursing to assist healthcare support workers who have shown a commitment to care to advance their careers.	Overview of changes to a flexible approach to nurse education. Not research.
Allan et al. (2013)	NS	To describe teachers' views of using e-learning for non-traditional students in nursing, chemistry & management	Qualitative; 4 focus groups (n= 12 staff), 7 taught nursing. Thematic analysis	3 themes identified; limited knowledge of non-traditional students, tailoring e-learning for non-traditional students and support for staff to develop e-learning.	Limited information on process of thematic analysis. Small scale, single site exploratory study. Appraisal=CASP

Gopee and Deane (2013)	NS	To examine strategies that students on health or social care courses utilise to develop as writers	Qualitative research 10 participants, semi-structured interviews, half were international students. Thematic analysis	Findings identified certain students struggled in academic writing if they did not receive tuition on appropriate and effective academic writing. Lack of tutor support was identified as a barrier to academic writing, as was students for whom English was a second language.	Small scale, single site exploratory study. No identification of number of nursing students Appraisal=CASP
Harris et al (2013)	Ethnicity	The study aimed to describe the first post gained after qualification (setting, nature of employment contract and geographical distribution).	8 universities within a large, multicultural city. Semi-structured questionnaires completed by 804 newly qualified nurses (response rate 77%)\n\nDescriptive statistics, multiple logistic, proportional odds and linear regression models	Predictors of employment success included ethnicity, specialty of nursing and university attended. Predictors of confidence and preparedness for job seeking included ethnicity, nursing specialty, gender and grade of degree. Newly qualified nurses from non-White/British ethnic groups were less likely to get a job and feel confident about and prepared for job seeking.	Study in a large multi-cultural city so may not be transferable to other universities. All students from one cohort which may not be representative of other cohorts.\n\nAppraisal=Moule et al.
Hasson (2013)	NS	Reports on an aspect (student nurses working part time) from a large mixed methods study.	32 students took part in 4 focus groups. In addition 13 individual interviews. Thematic analysis	Findings revealed that 27 (60%) of students were in paid nursing related employment. While advantageous regards to enhancing confidence, skills and time spent in the clinical setting it also led to role confusion.	Small scale, single site study. No exploration of working on attainment or completion. Appraisal=CASP
McKendry (2013)	Mature	To explore types of support	Two Phases Phase 1, 44 first year students (42 females	Phase 1 themes included motivators/drivers behind decision to join, challenges/transition issues, sources of support.	Singe site study. Focus groups occurred before

		available for 1st year nursing/ midwifery students	and 2 males) in 6 Focus Groups. Phase 2, 22 students from phase 1 returned to participate in 3 focus groups. Grounded theory-driven coding and thematic analysis.	Phase 2 themes included; importance of expectations, juggling multiple demands/commitments, sources of support, passion/enthusiasm. Students utilise a range of support mechanisms before and during their studies in order to maintain their motivation and to juggle the many demands on their time. These include university staff, fellow students, friends and family and those they currently know within the profession.	students experienced placement, which may identify additional support. Clear articulation of process of analysis to ensure credibility Appraisal=CASP
Ooms etal (2013)	Mature, English as additional language	The aims of the study were to identify usefulness of student support mechanisms across diverse student groups.	Questionnaire to 1st and 3rd year students at 2 separate universities (n=812 participants). T-tests for quantitative and framework method for open ended qualitative questions.	Programme leader (PL) and Module Leaders (ML) were identified as being significant to students (70% identified PL helped build confidence, 84% said ML helped then to be successful and 68% said PL and 75% said ML most important source of student support). Academic skills sessions were perceived by 87% to be useful with regards to completing assignments and increasing confidence (75%).	Large study across two universities. Did not identify specific ethnic groups or numbers, just noted that the numbers were significant. Appraisal=Moule et al.
Ross (2013)	NS		Editorial	Outlines the case for ensuring that HEI's consider recruitment strategies to include WP and on-going support during the course.	
Sharples (2013)	Disability	The aim of this study was to critically analyse experiences of eight deaf nurses' before, during and after their	Auto ethnographic; narrative enquiry approach with 8 mental Health Nurses working in the NHS. Thematic analysis	Themes identified were: educational and language ecology, clinical practice and language ecology, advocates and role models, peer support, peer learning, establishing a community of deaf nursing practice. The study identified that university experience was easier to manage (with access to interpreters) whilst practice environment was more challenging and even in specialist deaf services the nurses could be isolated.	Small scale study. CASP appraisal tool

		nursing programme			
Williams et al (2013)	NS	Describes a CertHE course for HCSW's to enhance care delivery.	Editorial	The paper highlights an example of workforce development that enables those from non-academic routes to access nursing education. It acknowledges difficulties of studying when a person has work and family commitments.	Did not identify how many students who completed this course progressed into nursing education programmes.

Key
WP – Widening participation
NS – not specified
HCSW – Health care support worker

Figure 1 Phases of an Integrative Review (Tavares de Souza et al. 2010)

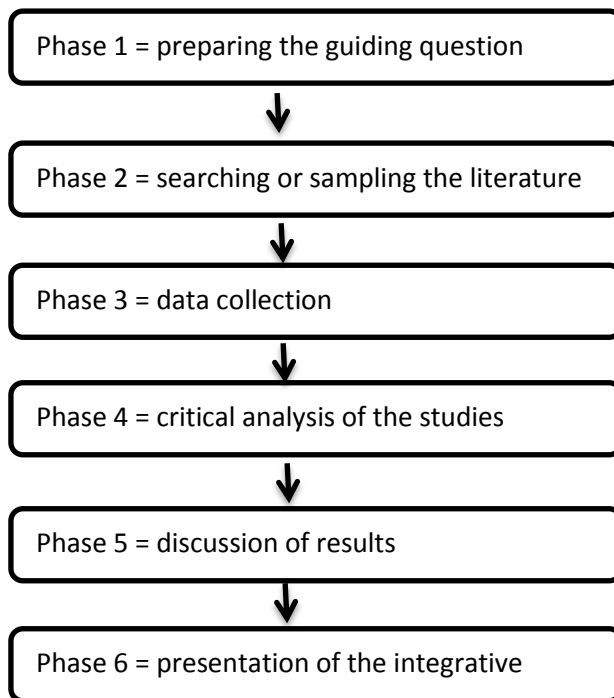Phase 1 = preparing the guiding question

↓

Phase 2 = searching or sampling the literature

↓

Phase 3 = data collection

↓

Phase 4 = critical analysis of the studies

↓

Phase 5 = discussion of results

↓

Phase 6 = presentation of the integrative

Figure 2

Identification

Papers identified through database
mySearch
(n = 439)

Additional papers identified
through other sources (Web of
Science = 110; Scopus = 113)
(n =   )

Papers after duplicates removed
(n = 449)

Stage 1

Papers screened
(n = 449)

Papers excluded (n = 414)

Papers excluded included those
focussed upon:

- Dental/Veterinary nursing
- social work
- post registration nursing

Stage 2

Full-text articles assessed
for eligibility
(n = 35)

Full-text articles excluded
(n = 21).

Papers excluded included those
which were not focussed upon:

- UK
- WP in nursing
- WP in nursing education

Stage 3

Papers included in the
review
(n = 14)